



<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				<b>Docket No.</b> 10854ABCD	
Applicant(s) <b>Bernd Gugel, et al.</b>					
<b>Application No.</b> 10/784,677	<b>Filing Date</b> February 23, 2004	<b>Examiner</b> Unassigned	<b>Customer No.</b> 23389	<b>Group Art Unit</b> Unassigned	<b>Confirmation No.</b> Unassigned

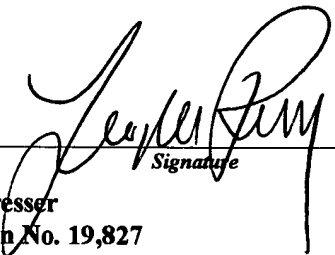
Invention: **A MEDICINAL OR DENTAL HAND INSTRUMENT**

COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.  
The fee has been calculated and is transmitted as shown below.

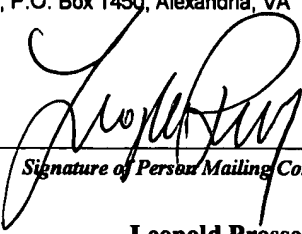
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	14 -	31 =	0 x	\$22.00	\$0.00	
INDEP. CLAIMS	2 -	3 =	0 x	\$82.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \_\_\_\_\_
- ☐ A check in the amount of \_\_\_\_\_ to cover the filing fee is enclosed.
- ☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account **19-1013/SSMP**
  - ☒ Any additional filing fees required under 37 C.F.R. 1.16.
  - ☒ Any patent application processing fees under 37 CFR 1.17.

  
Signature

Dated: **August 9, 2004**

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I certify that this document and fee is being deposited on <b>August 9, 2004</b> with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
 Signature of Person Mailing Correspondence
<b>Leopold Presser</b> Typed or Printed Name of Person Mailing Correspondence

CC:



IFW

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**Applicant(s):** Bernd Gugel, et al.

**Examiner:** Unassigned

**Serial No.:** 10/784,677

**Art Unit:** Unassigned

**Filed:** February 23, 2004

**Docket:** 10854ABCD

**For:** A MEDICINAL OR DENTAL  
HAND INSTRUMENT

**Dated:** August 9, 2004

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**PRELIMINARY AMENDMENT**

Sir:

Applicants respectfully request that the following amendments be entered into this application prior to the examination on the merits thereof:

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**CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on August 9, 2004.

Dated: August 9, 2004

  
\_\_\_\_\_  
Leopold Presser